

Visit:	REVISIT-C																		
<input type="checkbox"/> Week 0 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 8 <input type="checkbox"/> Week 16 <input type="checkbox"/> Week 24 <input type="checkbox"/> Other: _____	Rater Initials:			Site Number:				Subject Initials:				A	B		C				
	A	B	C	#	#	#	#	Date:			D	D	M	M	M	Y	Y	Y	Y
Relationship of Informant to participant:	Subject Number:							Start Time:			H	H		:	M		M		
	#	#	#	#	#	#	#	#	#	End Time:			H	H		:	M		M

Positive and Negative Syndrome Scale (PANSS)

Using the rating criteria from the PANSS Manual rate the participant using the following scale: 1 = Absent; 2 = Minimal; 3 = Mild; 4 = Moderate; 5 = Moderate/Severe; 6 = Severe; 7 = Extreme. Write each rating in the box to the left of the item.

	P1. Delusions
	P2. Conceptual disorganization
	P3. Hallucinatory behavior
	P4. Excitement
	P5. Grandiosity
	P6. Suspiciousness/persecution
	P7. Hostility
	N1. Blunted affect
	N2. Emotional withdrawal
	N3. Poor rapport
	N4. Passive/apathetic social withdrawal
	N5. Difficulty in abstract thinking
	N6. Lack of spontaneity and flow of conversation
	N7. Stereotyped thinking
	G1. Somatic concern
	G2. Anxiety
	G3. Guilt feelings
	G4. Tension
	G5. Mannerisms and posturing
	G6. Depression
	G7. Motor retardation
	G8. Uncooperativeness
	G9. Unusual thought content
	G10. Disorientation
	G11. Poor attention
	G12. Lack of judgment and insight
	G13. Disturbance of volition
	G14. Poor impulse control
	G15. Preoccupation
	G16. Active social avoidance

PANSS™ Quick Score

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